

THIS MESSAGE REQUIRES THE IMMEDIATE ATTENTION OF S1'S, CASUALTY ASSISTANCE OFFICES, AND MEDICAL TREATMENT FACILITIES. ALARACT 134/2006 COMBAT-RELATED INJURY REHABILITATION PAY (CIP) POLICY, DTG 071819Z JUL 06. This message announces the new special pay authorized by the NDAA for FY2006. Combat-related Injury Rehabilitation Pay (CIP) is a special pay for Soldiers who, in the line of duty, incur wounds, injuries, or illnesses in a combat operation or combat zone designated by the SECDEF and are evacuated from the theater for medical treatment. Soldiers may receive CIP during a portion of their rehabilitation. Some special pays received in the combat zone cease when hospitalized and/or placed on PCS reassignment. This entitlement allows soldiers the opportunity to adjust to the future reduction of pay benefits they were entitled to in the combat zone prior to being evacuated for medical treatment. FOR PAYMENT VERIFICATION, IDENTIFICATION OF SOLDIERS AND VERIFICATION OF ENTITLEMENT WILL BE COORDINATED BETWEEN THE MEDICAL AND PERSONNEL COMMUNITY. When entitlement is verified, the medical community i.e., OTSG will transmit the data to DFAS-IN, Army Military Pay Operations for payment or termination. See the message for eligibility criteria.

Classification: UNCLASSIFIED

Caveats: NONE

R 071819Z JUL 06

FM PTC WASHINGTON DC//ALARACT//

TO ALARACT

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\*\*\*\*\* THIS IS A COMBINED MESSAGE \*\*\*\*\*

SUBJ: ALARACT 134/2006

THIS MESSAGE HAS BEEN SENT BY THE PENTAGON TELECOMMUNICATIONS CENTER ON BEHALF OF DA WASHINGTON DC//DAPE-MSO//

SUBJECT: COMBAT-RELATED INJURY REHABILITATION PAY (CIP) POLICY

1. REFERENCES.

A. NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2006 (NDAA), SEC 642.

B. MEMORANDUM, UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS (USD(P&R)), SUBJECT: AVAILABILITY OF SPECIAL PAY FOR MEMBERS DURING REHABILITATION FROM WOUNDS, INJURIES, AND ILLNESSES INCURRED IN A COMBAT OPERATION OR COMBAT ZONE DESIGNATED BY THE SECRETARY OF DEFENSE, DATED MARCH 23, 2006.

2. PURPOSE. THIS MESSAGE ANNOUNCES THE NEW SPECIAL PAY AUTHORIZED BY THE NDAA FOR FY2006. COMBAT-RELATED INJURY REHABILITATION PAY (CIP) IS A SPECIAL PAY FOR SOLDIERS WHO, IN THE LINE OF DUTY, INCUR WOUNDS, INJURIES, OR ILLNESSES IN A COMBAT OPERATION OR COMBAT ZONE DESIGNATED BY THE SECDEF AND ARE EVACUATED FROM THE THEATER FOR MEDICAL TREATMENT. SOLDIERS MAY RECEIVE CIP DURING A PORTION OF THEIR REHABILITATION. SOME SPECIAL PAYS RECEIVED IN THE COMBAT ZONE CEASE WHEN HOSPITALIZED AND/OR PLACED ON PCS REASSIGNMENT. THIS ENTITLEMENT ALLOWS SOLDIERS THE OPPORTUNITY TO ADJUST TO THE FUTURE REDUCTION OF PAY BENEFITS THEY WERE ENTITLED TO IN THE COMBAT ZONE PRIOR TO BEING EVACUATED FOR MEDICAL TREATMENT.

3. ELIGIBILITY FOR COMBAT-RELATED INJURY REHABILITATION PAY (CIP).

A. THE CIP WILL BE PAID TO ELIGIBLE SOLDIERS WHO, WHILE IN THE LINE OF DUTY, INCUR A WOUND, INJURY OR ILLNESS IN A COMBAT OPERATION OR COMBAT ZONE DESIGNATED BY THE SECDEF (SEE PARA 4 AND 5 BELOW) AND ARE EVACUATED FROM THE THEATER OF COMBAT OPERATION OR COMBAT ZONE FOR MEDICAL TREATMENT. SOLDIER MUST BE HOSPITALIZED, AS DEFINED IN PARAGRAPH 6 BELOW, TO BE ELIGIBLE FOR CIP.

B. A WOUND, INJURY OR ILLNESS WILL BE CONSIDERED TO HAVE BEEN INCURRED IN THE LINE OF DUTY UNLESS IT WAS THE RESULT OF THE SOLDIER'S OWN INTENTIONAL MISCONDUCT OR WILLFUL NEGLIGENCE, OR INCURRED DURING A PERIOD OF UNAUTHORIZED ABSENCE.

4. DESIGNATION OF COMBAT OPERATIONS AND COMBAT ZONES. COMBAT ZONES DESIGNATED BY THE SECRETARY OF DEFENSE FOR CIP PURPOSES ARE THOSE GEOGRAPHIC LOCATIONS DESIGNATED BY THE PRESIDENT AS COMBAT ZONES. CURRENT COMBAT ZONES ARE LISTED BELOW. THEY ARE ALSO LISTED IN DOD FMR, VOL 7A, CHAPTER 44. FUTURE ADDITIONS AND DELETIONS OF DESIGNATED COMBAT ZONES WILL BE REFLECTED IN THE DOD FMR, VOL 7A, CHAPTER 44.

A. EXECUTIVE ORDER 12744, EFFECTIVE 17 JANUARY 1991:

ARABIAN SEA PORTION THAT LIES NORTH OF 10 DEGREES NORTH LATITUDE AND WEST OF 68 DEGREES EAST LONGITUDE

BAHRAIN  
GULF OF ADEN  
GULF OF OMAN  
IRAQ  
KUWAIT  
PERSIAN GULF  
QATAR  
OMAN  
RED SEA  
SAUDI ARABIA  
UNITED ARAB EMIRATES

B. EXECUTIVE ORDER 13119, EFFECTIVE 24 MARCH 1999:

THE FEDERAL REPUBLIC OF YUGOSLAVIA (SERBIA/MONTENEGRO)  
ALBANIA  
THE ADRIATIC SEA  
THE IONIAN SEA NORTH OF THE 39TH PARALLEL

C. EXECUTIVE ORDER 13239, EFFECTIVE 19 SEPTEMBER 2001:  
AFGHANISTAN.

5. COMBAT OPERATIONS (I.E., A MILITARY OPERATION CONDUCTED AGAINST A HOSTILE FORCE) CURRENTLY DESIGNATED BY THE SECDEF FOR CIP PURPOSES ARE OPERATION ENDURING FREEDOM (OEF) AND OPERATION IRAQI FREEDOM (OIF). THE SECDEF MAY DESIGNATE OTHER OPERATIONS AS COMBAT OPERATIONS; NECESSARY PAPERWORK REFLECTING SUCH A DESIGNATION MAY BE PREPARED AFTER THE FACT. SOLDIERS ISSUED ORDERS WITH OEF AND OIF MUST BE IN DIRECT SUPPORT OF COMBAT OPERATIONS TO BE ELIGIBLE FOR CIP.

6. SOLDIERS ARE CONSIDERED HOSPITALIZED FOR PURPOSES OF CIP IF ONE OF THE BELOW CRITERIA EXIST:

(1) THE SOLDIER IS AN INPATIENT IN A MILITARY TREATMENT FACILITY (MTF) OR A FACILITY UNDER THE AUSPICES OF THE MILITARY HEALTH CARE SYSTEM.

(2) THE SOLDIER IS AN OUTPATIENT RECEIVING EXTENSIVE REHABILITATION OR OTHER MEDICAL CARE IN AN MTF OR A FACILITY UNDER THE AUSPICES OF THE MILITARY HEALTH CARE SYSTEM AND IS RESIDING IN A FACILITY AFFILIATED WITH THE MTF; FOR EXAMPLE, A FISHER HOUSE, MOLOGNE HOUSE, BARRACKS CONSTRUCTED FOR THE PURPOSE OF HOUSING SOLDIERS WHILE AFFILIATED WITH THE MTF OR A CONTRACTED FACILITY (SUCH AS A HOTEL). SOLDIERS RESIDING PLACES OTHER THAN UNDER THE AUSPICES OF THE MTF (FOR EXAMPLE, SOLDIER IN HIS OR HER PRIVATE RESIDENCE) ARE NOT CONSIDERED TO BE RESIDING IN A FACILITY UNDER THE AUSPICES OF THE MILITARY HEALTH CARE SYSTEM AND ARE THUS NOT ELIGIBLE FOR CIP.

7. AMOUNTS OF CIP. THE ENTITLEMENT TO CIP IS \$430 MONTHLY LESS PAYMENT RECEIVED BY THE SOLDIER FOR THE SAME MONTH UNDER SECTION 310B OF TITLE 37 OF THE UNITED STATES CODE (37 USC 310(B)), HOSTILE FIRE/IMMINENT DANGER PAY (HF/IDP). 37 USC 310(B) AUTHORIZES THE CONTINUATION OF HF/IDP (\$225/MONTH) FOR UP TO THREE ADDITIONAL MONTHS FOR SOLDIERS HOSPITALIZED FOR THE TREATMENT OF AN INJURY OR WOUND INCURRED AS A RESULT OF HOSTILE FIRE, EXPLOSION OF A HOSTILE MINE, OR ANY OTHER HOSTILE ACTION; OR HOSPITALIZED FOR A WOUND, INJURY, OR ILLNESS INCURRED IN THE LINE OF DUTY IN A SECDEF DESIGNATED COMBAT OPERATION OR COMBAT ZONE.

8. CIP AND HF/IDP ARE PAYABLE IN ADDITION TO ANY OTHER PAY AND ALLOWANCES TO WHICH THE SOLDIER IS ENTITLED. CIP AND HF/IDP WILL BE PAID AT THE APPLICABLE MONTHLY RATE. NEITHER CIP NOR HF/IDP WILL BE PRORATED.

9. PAYMENT VERIFICATION. IDENTIFICATION OF SOLDIERS AND VERIFICATION OF ENTITLEMENT WILL BE COORDINATED BETWEEN THE MEDICAL AND PERSONNEL COMMUNITY. WHEN ENTITLEMENT IS VERIFIED, THE MEDICAL COMMUNITY I.E., OTSG WILL TRANSMIT THE DATA TO DFAS-IN, ARMY MILITARY PAY OPERATIONS FOR PAYMENT OR TERMINATION. UNTIMELY NOTIFICATION OF STATUS CHANGES MAY RESULT IN OVERPAYMENTS TO SOLDIERS, POTENTIALLY CAUSING THE SOLDIER UNNECESSARY INCONVENIENCE AND POTENTIAL HARDSHIP AND ADDITIONAL WORKLOAD IN THE PERSONNEL/PAY SYSTEM.

10. CIP PAYMENTS.

A. COMMENCEMENT OF PAYMENT. PAYMENTS FOR CIP SHALL COMMENCE TO AN ELIGIBLE SOLDIER THE MONTH BEGINNING AFTER THE DATE ON WHICH THE MEMBER IS EVACUATED FROM THE THEATER OF COMBAT OPERATION OR THE COMBAT ZONE FOR MEDICAL TREATMENT. IT MAY BE PAID TO SOLDIERS WHO INCURRED A QUALIFYING WOUND, INJURY, OR ILLNESS PRIOR TO 23 MARCH 2006 (THE DATE OF THE USD(P&R) CIP IMPLEMENTATION MEMORANDUM), AS LONG AS THE SOLDIER CONTINUED TO BE ELIGIBLE FOR CIP ON 23 MARCH 2006. HOWEVER, IN NO CASE ARE SOLDIERS ELIGIBLE FOR CIP PRIOR TO 23 MARCH 2006. THUS, THE FIRST CIP PAYMENT FOR THESE SOLDIERS WOULD BE 1 APRIL 2006 (PROVIDED THE SOLDIERS REMAINED ELIGIBLE FOR CIP ON 1 APRIL 2006).

B. TERMINATION OF PAYMENT.

(1) THE CIP WILL TERMINATE AT THE END OF THE FIRST MONTH DURING WHICH ANY OF THE FOLLOWING APPLY; CIP WILL NOT BE PRORATED FOR THE LAST MONTH OF PAYMENT.

(A) SOLDIER IS PAID A BENEFIT UNDER TRAUMATIC SERVICEMEMBERS GROUP LIFE INSURANCE (T-SGLI) 38 USC, SEC 1980A.

(B) SOLDIER RECEIVES NOTIFICATION OF THE ELIGIBILITY FOR A BENEFIT UNDER T-SGLI AND A PERIOD OF 30 DAYS EXPIRES AFTER THE DATE OF SUCH NOTIFICATION. T-SGLI APPROVAL NOTIFICATION WILL SERVE AS NOTIFICATION OF ELIGIBILITY.

(C) SOLDIER IS NO LONGER HOSPITALIZED AS DEFINED IN PARAGRAPH 6, ABOVE.

(2) ONCE A SOLDIER IS NO LONGER ELIGIBLE FOR CIP IN CONNECTION WITH AN INCURRED WOUND, INJURY OR ILLNESS (FOR EXAMPLE, SOLDIER IS DISCHARGED FROM THE HOSPITAL), ELIGIBILITY FOR CIP TERMINATES AND CANNOT BE REESTABLISHED IN CONNECTION WITH THAT SAME INJURY, WOUND OR ILLNESS EVEN IF THE SOLDIER IS REHOSPITALIZED AT A LATER DATE FOR FURTHER MEDICAL TREATMENT. HOWEVER, IF THE SOLDIER IS SUBSEQUENTLY ASSIGNED IN A COMBAT OPERATION OR COMBAT ZONE AND AGAIN INCURS A WOUND, INJURY OR ILLNESS AND IS EVACUATED FOR MEDICAL TREATMENT, SOLDIER COULD AGAIN BE ELIGIBLE FOR CIP.

(3) HUMAN RESOURCES COMMAND (HRC), PHYSICAL DISABILITY AGENCY (PDA), TRAUMATIC SERVICEMEMBERS GROUP LIFE INSURANCE (T-SGLI) DIVISION WILL PROVIDE DATA TO OTSG OF SOLDIERS THAT HAVE BEEN APPROVED FOR T-SGLI BI-MONTHLY.

(4) THE MEDICAL COMMUNITY WILL IDENTIFY SOLDIERS NO LONGER ELIGIBLE FOR CIP AND TRANSMIT DATA TO DFAS THAT:

(A) ARE NO LONGER HOSPITALIZED, AS DEFINED IN PARAGRAPH 6, ABOVE.

(B) HAVE RECEIVED THE T-SGLI BENEFITS, OR

(C) HAVE BEEN NOTIFIED IN WRITING OF PENDING T-SGLI PAYMENT OF BENEFITS PLUS A PERIOD OF 30 DAYS HAS EXPIRED.

C. EXAMPLES FOR CIP PAYMENT ARE:

(1) SOLDIER EVACUATED FROM CZ 27 NOVEMBER 2005 FOR MEDICAL TREATMENT AND REMAINED HOSPITALIZED THROUGH 15 MAY 2006 = CIP PAYMENT DUE TO SOLDIER FOR APRIL AND MAY 2006.

(2) SOLDIER EVACUATED FROM CZ FOR MEDICAL TREATMENT 1 MAY 2006 AND REMAINED HOSPITALIZED THROUGH 2 JULY 2006 = CIP PAYMENT DUE TO MEMBER FOR JUNE AND JULY 2006.

(3) SOLDIER EVACUATED FROM CZ FOR MEDICAL TREATMENT ON 31 MAY 2006 AND REMAINED HOSPITALIZED THROUGH 14 JUNE 2006 = CIP PAYMENT DUE TO SOLDIER FOR JUNE 2006.

(4) SOLDIER EVACUATED FROM CZ FOR MEDICAL TREATMENT 2 JUNE AND REMAINED HOSPITALIZED THROUGH 28 JUNE 2006 = NO CIP PAYMENT DUE.

(5) SOLDIER EVACUATED FROM CZ FOR MEDICAL TREATMENT ON 10 FEBRUARY 2006 AND RECEIVED T-SGLI PAYMENT 15 MARCH 2006, REMAINED HOSPITALIZED THROUGH 10 APRIL 2006 = NO CIP PAYMENT DUE TO SOLDIER.

(6) SOLDIER EVACUATED FROM CZ FOR MEDICAL TREATMENT ON 22 MARCH 2006, SOLDIER WAS NOTIFIED 10 APRIL 2006 THAT SHE WOULD RECEIVE T-SGLI PAYMENT, AND SOLDIER RECEIVED T-SGLI PAYMENT 28 APRIL 2006. CIP PAYMENT DUE TO SOLDIER FOR APRIL 2006.

(7) SOLDIER EVACUATED FROM CZ FOR MEDICAL TREATMENT ON 5 APRIL 2006, IN HOSPITAL AT WRAMC UNTIL 25 MAY 2006, SOLDIER MOVES INTO THE MOLOGNE HOUSE FOR CONTINUED OUTPATIENT TREATMENT AT WRAMC, SOLDIER MOVES TO HIS/HER HOME IN TOWSON, MD ON CONVALESCENT LEAVE ON 20 JUNE 2006 = CIP PAYMENT DUE TO SOLDIER FOR MAY AND JUNE 2006.

11. AUDIT AND STATISTICAL DATA BY FISCAL YEAR.

A. DFAS WILL GENERATE AND PROVIDE A MONTHLY FILE OF CIP PAYMENTS TO OTSG AND HRC. HRC WILL SEND DISCREPANCIES TO OTSG. OTSG WILL CROSS CHECK THEIR RECORDS TO ENSURE THAT ALL RECIPIENTS ARE STILL ELIGIBLE FOR CIP.

B. DFAS WILL GENERATE AND SEND OUT A MONTHLY STATISTICAL REPORT PROVIDING THE NUMBER OF SOLDIERS RECEIVING CIP. THE REPORT WILL BE BY RANK AND COMPONENT. ADDITIONALLY THE MONTHLY COST FOR CIP WILL BE PROVIDED. IF CIP IS RECEIVED FOR A DIFFERENT MONTH THAT MONTH WILL BE IDENTIFIED.

12. RECONSIDERATION ON CIP STATUS.

A. SOLDIERS THAT DISAGREE WITH THEIR CIP ENTITLEMENT DUE TO MEDICAL STATUS ARE TO SUBMIT A MEMORANDUM FOR RECONSIDERATION TO: DEPARTMENT OF THE ARMY, OFFICE OF THE SURGEON GENERAL, HEALTH POLICY AND SERVICES, 5109 LEESBURG PIKE, AND FALLS CHURCH, VA 22041-3258. THE OTSG WILL PROVIDE THE SOLDIER WITH THE DECISION ON CIP AFTER CONSIDERING ALL VALID INFORMATION. THE MEMORANDUM MUST CONTAIN THE FOLLOWING INFORMATION:

(1) PATIENT NAME, SSN, AND CURRENT MTF:

(2) MEDICAL STATUS (INPATIENT, OUTPATIENT, EXTENSIVE REHABILITATION):

(3) DATE OF HOSPITALIZATION REQUIRING REHABILITATION:

(4) DESCRIPTION OF ONGOING EXTENSIVE REHABILITATION:

(5) ATTENDING PHYSICIAN POC AND PHONE NUMBER/EMAIL:

(6) EXPLANATION OF WHY SOLDIER BELIEVES HE OR SHE MAY BE ENTITLED TO CIP:

B. SOLDIERS THAT DISAGREE WITH THEIR CIP ENTITLEMENT DUE TO T-SGLI STATUS ARE TO SUBMIT A MEMORANDUM FOR RECONSIDERATION TO: HUMAN RESOURCES COMMAND, ATTN: AHRC-DZB-TSGLI, 200 STOVALL STREET, ALEXANDRIA, VA, 22332-0470, PHONE: 1-800-237-1336, E-MAIL TSGLI@HOFFMAN.ARMY.MIL OR WEBSITE: [WWW.TSGLI.ARMY.MIL](http://WWW.TSGLI.ARMY.MIL). THE TSGLI DIVISION WILL PROVIDE THE SOLDIER WITH THE DECISION ON CIP AFTER CONSIDERING ALL VALID INFORMATION. THE MEMORANDUM MUST CONTAIN THE FOLLOWING INFORMATION:

(1) PATIENT NAME, SSN, AND CURRENT MTF:

(2) MEDICAL STATUS (INPATIENT, OUTPATIENT, EXTENSIVE REHABILITATION):

(3) DATE OF HOSPITALIZATION REQUIRING REHABILITATION:

(4) DESCRIPTION OF ONGOING EXTENSIVE REHABILITATION:

(5) ATTENDING PHYSICIAN POC AND PHONE NUMBER/EMAIL:

(6) EXPLANATION OF WHY SOLDIER BELIEVES HE OR SHE MAY BE ENTITLED TO

CIP:

13. DECEASED SOLDIER. UPON DETERMINATION THAT A DECEASED SOLDIER WOULD HAVE BEEN ELIGIBLE TO RECEIVE CIP AS OF 23 MARCH 2006 OR LATER THE OFFICE OF THE SURGEON GENERAL, HEALTH POLICY AND SERVICES DIRECTORATE, DSN 761-3174 OR COMMERCIAL (703) 681-3174 SHOULD BE NOTIFIED. THE OTSG WILL COORDINATE WITH HRC TO DETERMINE IF T-SGLI WAS RECEIVED AND IF SO WHEN. OTSG WILL NOTIFY DFAS OF THE CERTIFYING DATES OF ELIGIBILITY AND STOP DATE. DFAS WILL MAKE THE PAYMENT VIA CHECK OR EFT WITH THE SOLDIER S NEXT OF KIN/LEGAL REPRESENTATIVE.

14. GRIEVANCE. THE ARMY BOARD FOR CORRECTION OF MILITARY RECORDS IS THE HIGHEST LEVEL OF ADMINISTRATIVE REVIEW WITHIN THE DEPARTMENT OF THE ARMY. UNLESS PROCURED BY FRAUD, A DECISION IS FINAL AND BINDING ON ALL ARMY OFFICIALS AND OTHER GOVERNMENT AGENCIES.

A. ACTIVE DUTY SOLDIERS AND FORMER MEMBERS OF THE REGULAR ARMY, ARMY RESERVE, AND ARMY NATIONAL GUARD: IF THE FORMER MEMBER IS DECEASED OR INCOMPETENT, THE SURVIVING SPOUSE, NEXT OF KIN, OR A LEGAL REPRESENTATIVE MAY APPLY. HOWEVER, THE APPLICATION MUST INCLUDE SUPPORTING DOCUMENTATION SUCH AS A CERTIFIED COPY OF A MARRIAGE LICENSE, DEATH CERTIFICATE, OR POWER OF ATTORNEY AS APPROPRIATE.

B. HOW TO APPLY. SUBMIT AN ORIGINAL COMPLETED AND SIGNED DD FORM 149, APPLICATION FOR CORRECTION OF MILITARY RECORD WITH SUPPORTING DOCUMENTATION. BLANK APPLICATIONS FORMS ARE AVAILABLE AT

[HTTP://ARBA.ARMY.PENTAGON.MIL/ABCMR.HTM](http://arba.army.pentagon.mil/abcmr.htm) BLANK APPLICATION FORMS CAN ALSO BE OBTAINED FROM ANY MILITARY PERSONNEL/ HUMAN RESOURCE OFFICE OR BY SENDING A REQUEST TO THE ARMY REVIEW BOARDS AGENCY, ATTN: CONGRESSIONAL AND SPECIAL ACTIONS OFFICE, 1901 S. BELL STREET, ARLINGTON, VA 22202-4508. YOU MAY ALSO SUBMIT AN APPLICATION ONLINE ([HTTP://ACTSONLINE.ARMY.MIL](http://actsonline.army.mil)).

15. POINTS OF CONTACT. ENSURE THAT YOU HAVE GONE THROUGH YOUR APPROPRIATE CHAIN OF COMMAND FOR INQUIRIES PRIOR TO HAVING THEM CONTACT THE FOLLOWING POCS:

A. THE SURGEON GENERALS OFFICE FOR ELIGIBILITY AND TERMINATION DUE TO MEDICAL STATUS: OFFICE OF THE SURGEON GENERAL, HEALTH POLICY AND SERVICES DIRECTORATE, DSN 761-3174 OR COMMERCIAL (703) 681-3174.

B. HUMAN RESOURCES COMMAND FOR T-SGLI AND TERMINATION DUE TO T-SGLI: ATTN: AHRC-DZB-TSGLI, 200 STOVALL STREET, SUITE 8N65, ALEXANDRIA, VA 22332-0470, PHONE #: 1-800-237-1336 OR TSGLI@HOFFMAN.ARMY.MIL, WEBSITE: [WWW.TSGLI.ARMY.MIL](http://www.tsqli.army.mil).

C. PAY ISSUES:

(1) SERVICING DEFENSE MILITARY PAY OFFICE OR FINANCE OFFICE.

(2) USAFINCOM MS. PANSY CHESNEY, PANSY.CHESENEY@DFAS.MIL, DSN 699-2916, (317) 510-2916 OR ALTERNATE MR. JESSE SABLAN, JESSE.SABLAN@DFAS.MIL, DSN 699-6910, (317) 510-6910.

(3) DFAS FOR POLICY ISSUES CONTACT MRS. LINDA TWERBERG, LINDA.TWERBERG@DFAS.MIL, DSN 699-3241, (317) 510-3241 OR SYSTEM ISSUES MR. RANDY HARTLE, RANDY.HARTLE@DFAS.MIL, DSN 699-6300, (317) 510-6300.

D. COMPENSATION/ENTITLEMENTS, G-1, POC ON POLICY ISSUES CONTAINED IN THIS MESSAGE: MRS. SUSAN DYER, SUSAN.DYER@HQDA.ARMY.MIL, DSN 222-6888, (703) 692-6888.

16. THIS ALARACT APPLIES TO THE TOTAL ARMY.

17. EXPIRATION DATE CANNOT BE DETERMINED.

BT

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Classification: UNCLASSIFIED  
Caveats: NONE